								Application or Docket Number													
PATENT APPLICATION FEE DETERMINATION RECOF																					
Effective October 1, 2000							04/726147														
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY											
TOTAL CLAIMS							, R	TE	FEE		RATE	FEE									
FOR			NUMBER FILED		NUMBER EXTRA		BAS	BASIC FEE 355.00		OR	Basic Fee	710.00									
TOTAL CHARGEABLE CLAIMS			35 minus 20=		· 15		X\$ 9=			OR	X\$18=	270-00									
INDEPENDENT CLAIMS			3 m	inus 3 =	•		X40=			OR	X80=										
MULTIPLE DEPENDENT CLAIM PRESENT						+135=		OR	+270=												
* If the difference in column 1 is less than zero, enter "0" in column 2							TO	TAL		OR	TOTAL	980.00									
CLAIMS AS AMENDED - PART II							0	OTHER THAN													
4	9-27-04 (Column 1) (Column 2)						Column 3) SMALL EN			OR	SMALL										
ENT A		REMAINING AFTER AMENDMENT		NUM PREVK PAID	BER DUSLY	PRESENT EXTRA	R	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE									
AMENDMENT	Total	. 35	Minus		35	• /	XS	9=		OR	X\$18=										
E	Independent	• <3	Minus	•••	3	•	X	IO=		OR	X80=										
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								35=	,	OR	+270=										
								OTAL			TOTAL										
(Column 1) (Column 2) (Column 3)								r. FEE	<u> </u>	.	ADDIT. FEE										
		CLAIMS		High	EST			•	ADDI-	<u> </u>		ADDI-									
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVI PAID		PRESENT EXTRA	R	TE	TIONAL FEE	·	RATE	TIONAL FEE									
2	Total	.35	Minus	- 3	5	-0	X	9=		OR	X\$18=										
MA	independent	NTATION OF M	Minus	PENDEND	3 ICI AIM	→	. X40=		•	OR	X80=										
	V:	HIMION OF M	OCHIPLE VC	CHUCH	- CLAIN		+1	35=		OR	+270=										
						. •		OTAL FEE		OR	YOTAL ADDIT, FEE										
(Column 1) (Column 2) (Column 3)										-											
		CLAIMS		HIGH	EST				ADDI-			ADDI-									
AMENDMENT C		REMAINING AFTER - AMENDMENT		PREVI		PRESENT EXTRA	R/	TE	TIONAL FEE		RATE	TIONAL FEE									
	Total	•	Minus	••		-	XS	9=		OR	X\$18=	7									
		•	Minus	•••		=		0=		OR	X80=										
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM																				
" If the entry in column 1 is less than the entry in column 2, write "t" in column 3.								35=		OR	+270=										
"If the "Highest Number Previously Pald For" IN THIS SPACE is less than 20, enter "20." ADDIT, FEE										OR	TOTAL ADDIT. FEE										
	ii the Trighest Nu The Trighest Num	imper Previously P nber Previously Pa	id For" (Total o	or Independ	ieni) is th	e highest numbe	r tound in	the ap	propriete bo	in co	Aumn 1.										
								-		The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											